

Please type a plus sign (+) inside this box → ☐

Approved for use through 10/31/2002 OMB 0651-0032

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e) required))	Attorney Docket Number	PINTO-003A
	First Named Inventor	A. Gregory Pinto
	COMPLETE IF KNOWN	
	Application Number	/
	Filing Date	
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

SYSTEM AND METHOD OF CONVERTING VIDEO TO BITMAP ANIMATION FOR USE IN ELECTRONIC MAIL

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) _____ as United States Application Number or PCT International Application Number _____ and was amended on (MM/DD/YYYY) _____ (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended by any amendment specifically referred to above

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

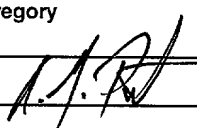
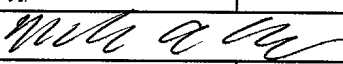
☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

Please type a plus sign (+) inside this box → ☐

Approved for use through 10/31/2002 OMB 0651-0032

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

DECLARATION — Utility or Design Patent Application					
Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number <u>007663</u> OR <input type="checkbox"/> Correspondence Address Below or Bar Code Label _____					
Name Bruce B. Brunda					
Address STETINA BRUNDA GARRED & BRUCKER 75 Enterprise, Suite 250					
City Aliso Viejo		State CA	ZIP 92656		
Country U.S.A.		Telephone (949)855-1246		Fax (949)855-6371	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name Albert Gregory (first and middle [if any])			Family Name Pinto or Surname		
Inventor's Signature 				Date 08/27/01	
Residence: (City) Anaheim Hills		State CA	Country U.S.A.	Citizenship U.S.A.	
Mailing Address 715 South Canyon Mist Lane					
City: Anaheim Hills		State CA	ZIP 92808	Country U.S.A.	
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name Malachi Daniel (first and middle [if any])			Family Name Clark or Surname		
Inventor's Signature 				Date 08/27/01	
Residence: City: Costa Mesa		State CA	Country U.S.A.	Citizenship U.S.A.	
Mailing Address 1201 Parnell Place					
City Costa Mesa		State CA	ZIP 92626	Country U.S.A.	
<input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB02A attached hereto					

106230" 33314650

Please type a plus sign (+) inside this box ☐

PTO/SB/81 (02-01)

Approved for use through 10/31/2002 OMB 0651-0035

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT	Application Number	Unknown
	Filing Date	Herewith
	First Named Inventor	Albert G. Pinto
	Group Art Unit	Unknown
	Examiner Name	Unknown
	Attorney Docket Number	PINTO-003A

I hereby appoint:

Place Customer Number Bar

☒ Practitioners at Customer Number 007663
Attention: **Bruce B. Brunda**

Code Label here

OR

☐ Practitioner(s) named below:

Name

Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☒ The above-mentioned Customer Number: Attention: **Bruce B. Brunda**

OR

☐ Practitioners at Customer Number _____
Attention: [attorney name]

Code Label here

OR

☐ Firm or Individual
Name

Address

Address

City

State

ZIP

Country

Telephone

Fax

I am the:

☐ Applicant.

☒ Assignee of record of the entire interest
Certificate under 37 CFR 3.73(b) is enclosed

SIGNATURE OF Applicant or Assignee of Record

Name

Albert G. Pinto

Signature

Date

August 27, 2001

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

x *Total of 1 forms are submitted.

SEND TO: Assistant Commissioner for Patents, Washington, D.C. 20231